



# Village of Canal Winchester

36 South High Street  
Canal Winchester, Ohio 43110

Planning and Zoning Department  
Phone (614) 837-7501 Fax (614) 837-0145

## **CERTIFICATE OF ZONING COMPLIANCE APPLICATION**

rev. 6/21/2010

### **PROPERTY OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email \_\_\_\_\_

### **APPLICANT**

Name \_\_\_\_\_

Address \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Email \_\_\_\_\_

Address of Subject Property \_\_\_\_\_

Proposed Use \_\_\_\_\_

\_\_\_\_\_

Attach a current (within 2 years) survey along plan showing dimensions of all existing and proposed structures. The Planning & Zoning Administrator may require additional information to determine compliance with the zoning code.

**I certify that the information provided with this application is correct and accurate  
to the best of my ability.**

\_\_\_\_\_  
**Property Owner's or Authorize Agent's Signature**

\_\_\_\_\_  
**Date**

**DO NOT WRITE BELOW THIS LINE**

Date Received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Fee: \$ \_\_\_\_\_  
Paid ☐

Historic District: \_\_\_\_ Yes \_\_\_\_ No

Preservation Area: \_\_\_\_ Yes \_\_\_\_ No

Date of Action: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Application \_\_\_\_ No

Expiration Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Approved: \_\_\_\_ Yes

\_\_\_\_ Yes, with conditions

Tracking Number: ZC - \_\_\_\_\_